



Learner Feedback Form

Course: CEFR Sign Language Basic User A2

Tutor Name: _____

1. What do you like best about this course? 😊 😐 😞

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2. What would you like to change about the course? 😊 😐 😞

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3. What are the tutor's strengths? 😊 😐 😞

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4. What suggestions do you have to improve the tutor's teaching? 😊 😐 😞

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5. What was the most interesting part on the course you enjoyed most? 😊 😐 😞

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